

are experiencing amongst our youth. From Columbine, from Texas, to Germany we have seen the tragic consequences of youth violence.

The video game industry is a \$9 billion industry. But it is not about money, it is about our children. As an adult, you can shoot a gun, you can drink a beer, you can smoke a cigar. But if you are giving these substances to a child, you are a criminal. When it comes to video games with violent or sexual content, the same should be true.

The pornography industry, the gun industry, the tobacco industry, and the alcohol industry all accept regulations on their products when it comes to kids. And so must the video industry do the same.

We, as parents, need to take responsibility for our children. We have to monitor where and what they are learning and the type of behavior. We are the first and last line of defense. But stores also have a responsibility. Parents cannot be undermined by stores that are only looking to make a profit.

□ 1400

Nine out of 10 parents want the stores to prevent our children from buying these games. The fact is that these stores are not enforcing their own policies. When stores have to decide whether to sell a game or make it quick, they do not enforce the policies. That is why, Mr. Speaker, I have introduced H.R. 4645, the Protect Children from Video Game Sex and Violence Act.

#### RECESS

The SPEAKER pro tempore (Mr. SHIMKUS). Pursuant to clause 12 of rule I, the Chair declares the House in recess subject to the call of the Chair.

Accordingly (at 2 p.m.), the House stood in recess subject to the call of the Chair.

□ 1643

#### AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. JEFF MILLER of Florida) at 4 o'clock and 43 minutes p.m.

#### PERSONAL EXPLANATION

Mr. BISHOP. Mr. Speaker, on roll-calls 288 and 291, I inadvertently voted "no" when I intended and should have voted "yes."

#### THE 14TH INTERNATIONAL AIDS CONFERENCE FOR KNOWLEDGE AND COMMITMENT TO ACTION

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. LEE) is recognized for 5 minutes.

Ms. LEE. Mr. Speaker, this weekend in Barcelona, Spain, 15,000 people came

together for the 14th International AIDS Conference for Knowledge and Commitment for Action.

I had the privilege to participate in this very important conference and can say with certainty that while Congress and the administration are waking up to the desperate call of millions of individuals living with HIV and AIDS, and those yet to be born to this scourge, we are still not doing enough.

Let me bring the Members up to date on this global pandemic. In 2001, there were 5 million new AIDS infections across the globe. Today there are 40 million people living with AIDS worldwide, and there are 14 million AIDS orphans.

In the United States, 950,000 have been diagnosed with AIDS. African Americans make up only 13 percent of the total United States population, but 54 percent of new infections and 82 percent of women who are newly infected with HIV are African American and Hispanic.

In my district in Oakland, California, we declared a state of emergency in order to focus attention on this tragic, tragic crisis. The latest statistics indicate that the number of new infections is slowing in Alameda County; yet we must do more.

□ 1645

AIDS is a disease that affects the entire human family. It has impacted every corner of the Earth. Therefore, we must discuss this problem in a global context. We must address prevention, treatment, vaccines, access, and funding in a comprehensive fashion.

At the conference, I heard repeated over and over again that while developing a vaccine we must help developing countries develop the required health care delivery systems and infrastructure to ensure equal access. We cannot repeat the pattern we have seen on the African continent where access to anti-retroviral drugs and AIDS treatment are far from equal. Currently in Africa more than 28 million people are living with HIV and AIDS. However, only 30,000 are in treatment. In comparison to the United States, nearly 100 percent of people who are infected are in treatment and they need it and they receive it.

At the conference we again engaged the ongoing debate over prevention versus treatment. Most concluded, and rightfully so, that it must not be an either/or dilemma. Working to prevent the mother-to-child transmission must not exclude keeping the mother, father and child alive. Once again, there is no way we should buy into an either/or strategy.

While I am pleased that President Bush has acknowledged the need for drugs to reduce mother-to-child transmissions, that is only one component of what should be a multifaceted approach to tackling this pandemic. In Barcelona at a remarkable AIDS march for life, thousands came together to call for treatment now and presented

the Barcelona Declaration, which was read into the opening session of the conference.

This declaration called for securing donations of \$10 billion per year for global AIDS; antiretroviral treatment for at least 2 million people with HIV/AIDS in the developing world by 2004; lower affordable drug prices and universal access to generics in the developing world; and a new global partnership between government and NGOs.

Mr. Speaker, the entire Barcelona Declaration is as follows:

#### BARCELONA DECLARATION

##### \$10 BILLION FOR AIDS TREATMENT

##### 2 MILLION PEOPLE WORLDWIDE IN TREATMENT BY 2004

Whereas every single day AIDS claims 8,500 lives, or the equivalent of three World Trade Center disasters daily;

Whereas by December 2001, 40 million people were living with HIV/AIDS, and by 2005 an estimated 100 million will be infected;

Whereas more than 40 million children—most of them in developing nations—will be orphaned by AIDS by 2010;

Whereas the World Health Organization this year has stated that anti-retroviral treatment is medically essential and has issued specific treatment guidelines, monitoring standards and regimen recommendations;

Whereas those on treatment represent less than 2% of all those infected with HIV because such treatment is almost completely unavailable in developing nations;

Whereas over 500 non-governmental organizations globally have endorsed the Barcelona March for Life, which demands treatment access to at least 2 million individuals in the developing world by the time of the 2004 International Conference on AIDS in Bangkok;

Whereas these organizations represent AIDS activists from Africa, Asia and the Pacific Islands, Australia, Europe, Central and South America, and North America

Therefore, we declare as activists pledged to life for all persons with HIV/AIDS that we are committed to the following goals:

1. Securing donation of \$10 billion dollars per year for global AIDS;

2. Antiretroviral (ARV) treatment for at least two million people with HIV/AIDS in the developing world by the 2004 Bangkok AIDS conference;

3. Lower, affordable ARV drug prices in the developed world and universal access to generics in the developing world by Bangkok, 2004; and

4. A new global partnership between government and NGOs recognizing the primary role of NGOs in the global fight against AIDS.

We call on the delegates of the Barcelona International AIDS Conference to pledge themselves to these goals.

Now, I must mention a very disappointing turn of events leading up to the Barcelona conference. Many African delegates, especially those living with HIV and AIDS, were singled out and denied visas by Spain for questionable reasons. Therefore, the conference did not benefit from the insights of those living with this disease at its epicenter in Africa. We lost the voices we heard at the 13th conference in Durban, South Africa, in 2000.

In Barcelona we heard many strategies and staggering statistics of lives destroyed, but we also heard models of